

RECEIVED

2011 FEB 25 AM 10:20
FEC MAIL CENTERFEC
FORM 1STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF
COMMITTEE (in full)☐ (Check if name
is changed)Example: If typing, type
over the lines.

12FE4M5

Coalition of Americans for Political Equality

ADDRESS (number and street)

5000 Birch Street

☐ (Check if address
is changed)

Suite 3000

Newport Beach

CA

92660

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐ (Check if address
is changed)

sa@capepac.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address
is changed)

www.capepac.org

2. DATE

02 / 23 / 2011

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

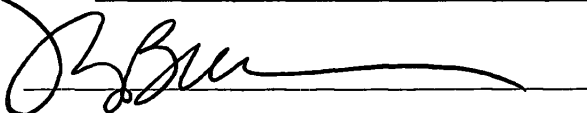
AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Margaret Berardinelli

Signature of Treasurer



Date

02 / 23 / 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100FEC FORM 1
(Revised 02/2009)

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